

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         |          |        |          |
| O.I.P.E. CLASSIFIER       |          | 59     | 1/2      |
| FORMALITY REVIEW          | DW       | 72346  | 12-20-00 |
| RESPONSE FORMALITY REVIEW |          |        |          |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date   |
|----------------|--------|
| Final Original |        |
| 1              | 1/1/03 |
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| Claim          | Date   |
|----------------|--------|
| Final Original |        |
| 51             | 1/1/03 |
| 52             | 1/1/04 |
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| Claim          | Date   |
|----------------|--------|
| Final Original |        |
| 101            | 1/7/04 |
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If more than 150 claims or 10 actions  
staple additional sheet here

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